

Consolidated Plan for the District of Columbia

Fiscal Year 2003 Action Plan

Prepared by the
D.C. Department of Housing and Community Development
801 North Capitol Street, N.E.
Washington, DC 20002

Government of the District of Columbia
Anthony A. Williams, Mayor

Department of Housing and Community Development
Stanley Jackson, Director

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Consolidated Plan for the District of Columbia

Fiscal Year 2003 Action Plan

1. Introduction

This document constitutes the Action Plan of the Department of Housing and Community Development (DHCD) of the District of Columbia for Fiscal Year 2003 (October 1, 2002 to September 30, 2003). The annual submission of an Action Plan to the U.S. Department of Housing and Urban Development (HUD) is required by the National Affordable Housing Act in order for the District to continue to be eligible to receive the HUD entitlement grant funds covered by this application.

The Action Plan is not only an application to HUD for federal funding, it also is a statement of the strategic activities DHCD, as the District's designated program administrator, intends to undertake during the fiscal year that the Plan covers. Activities included in the Plan must tie into a strategy to achieve three HUD prescribed goals to develop viable communities:

1. To provide decent housing;
2. To provide a suitable living environment; and
3. To expand economic opportunities, principally for low- and moderate-income persons.*

There are four HUD entitlement grant programs included in this consolidated application:

- Community Development Block Grant Program (CDBG)
- HOME Investment Partnerships Program (HOME)
- Emergency Shelter Grants Program (ESG)
- Housing Opportunities for Persons with AIDS Program (HOPWA)

2. Form SF-424, Application for Federal Assistance

A Form *SF-424, Application for Federal Assistance*, for each of the entitlement grant programs is provided on the following five pages of this document.

* N.B. For the purposes of this application, DHCD uses "low" and "moderate" as defined in CDBG regulations. These correspond to "very low" and "low" in HOME and Section 8 regulations.

Application for Federal Assistance

OMB Approval No. 0348-0043

1. Type of Submission Application <input type="checkbox"/> Construction <input checked="" type="checkbox"/> Non-Construction Pre-application <input type="checkbox"/> Construction <input checked="" type="checkbox"/> Non-Construction	2. Date Submitted (mm/dd/yyyy)	Applicant Identifier
	3. Date Received by State (mm/dd/yyyy)	State Application Identifier
	4. Date Received by Federal Agency (mm/dd/yyyy)	Federal Identifier

5. Applicant Information

Legal Name District of Columbia	Organizational Unit Department of Housing and Community Development
Address (give city, county, State, and zip code) 801 North Capitol Street, N.E. Washington, DC 20002	Name and telephone number of the person to be contacted on matters involving this application (give area code) Paul Cohn (202) 442-7233

6. Employer Identification Number (EIN) (xx-yyyys)

53	6001131
----	---------

6. Type of Application:

☒ New ☐ Continuation ☐ Revision

If Revision, enter appropriate letter(s) in box(es): ☐ ☐

A. Increase Award B. Decrease Award C. Increase Duration
D. Decrease Duration Other (specify)

7. Type of Applicant (enter appropriate letter in box)

A

A. State J. Private University
B. County K. Indian Tribe
C. Municipal L. Individual
D. Township M. Profit Organization
E. Interstate N. Nonprofit
F. Inter-municipal O. Public Housing Agency
G. Special District P. Other (Specify)
H. Independent School Dist.
I. State Controlled Institution of Higher Learning

9. Name of Federal Agency

U.S. Department of Housing and Urban Development

10. Catalog of Federal Domestic Assistance Number (xx-yyy)

Title:	14	218
Community Development Block Grant (CDBG) Entitlement Grant		

11. Descriptive Title of Applicant's Project

Year 28 Community Development Block Grant Program

12. Areas Affected by Project (cities, counties, States, etc.)

District of Columbia (District-wide)

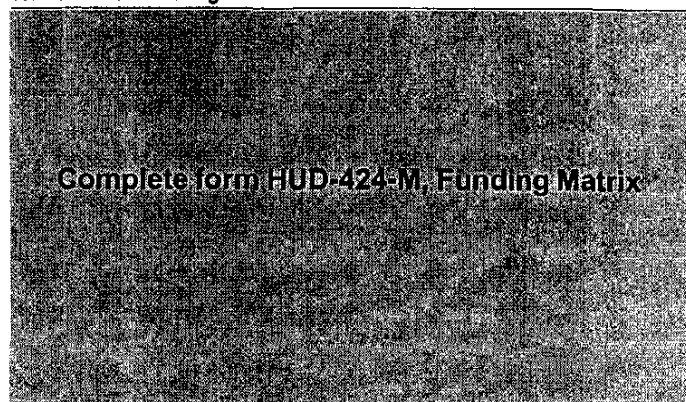
13. Proposed Project

Start Date (mm/dd/yyyy) 10/01/2002	Ending Date (mm/dd/yyyy) 09/30/2003
---------------------------------------	--

14. Congressional Districts of

a. Applicant District of Columbia	b. Project District of Columbia
--------------------------------------	------------------------------------

15. Estimated Funding



Complete form HUD-424-M, Funding Matrix

16. Is Application Subject to Review by State Executive Order 12372 Process?

a. Yes This pre-application/application was made available to the State Executive Order 12372 Process for review on:

Date (mm/dd/yyyy) 07/08/2002

b. No ☐ Program is not covered by E.O. 12372

or ☐ Program has not been selected by State for review.

17. Is the Applicant Delinquent on Any Federal Debt?

☐ Yes If "Yes," attach an explanation ☒ No

18. To the best of my knowledge and belief, all data in this application/pre-application are true and correct, the document has been duly authorized by the governing body of the applicant and the applicant will comply with the attached assurances if the assistance is awarded.

a. Typed Name of Authorized Representative Stanley Jackson	b. Title Director, DHCD	c. Telephone Number (Include Area Code) (202) 442-7210
d. Signature of Authorized Representative	e. Date Signed (mm/dd/yyyy) July 8, 2002	

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form SF-424 (7/97)
Prescribed by OMB Circular A-102

Application for Federal Assistance

OMB Approval No. 0348-0043

1. Type of Submission <div style="display: flex; justify-content: space-between;"> <div style="width:48%;"> Application <input type="checkbox"/> Construction <input checked="" type="checkbox"/> Non-Construction </div> <div style="width:48%;"> Pre-application <input type="checkbox"/> Construction <input checked="" type="checkbox"/> Non-Construction </div> </div>		2. Date Submitted (mm/dd/yyyy) 	Applicant Identifier
3. Date Received by State (mm/dd/yyyy) 		State Application Identifier 	
		4. Date Received by Federal Agency (mm/dd/yyyy) 	

5. Applicant Information Legal Name District of Columbia Address (give city, county, State, and zip code) 801 North Capitol Street, N.E. Washington, DC 2002		Organizational Unit Department of Housing and Community Development Name and telephone number of the person to be contacted on matters involving this application (give area code) Paul Cohn (202) 442-7233
--	--	---

6. Employer Identification Number (EIN) (xx-yyyzzzz) <div style="display: flex; justify-content: space-between; align-items: center;"> <div style="border: 1px solid black; padding: 2px 10px;">53</div> <div style="border: 1px solid black; padding: 2px 10px;">6001131</div> </div>	7. Type of Applicant (enter appropriate letter in box) <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; line-height: 30px; margin: 5px auto;">A</div> <div style="font-size: small;"> A. State B. County C. Municipal D. Township E. Interstate F. Inter-municipal G. Special District H. Independent School Dist. I. State Controlled Institution of Higher Learning J. Private University K. Indian Tribe L. Individual M. Profit Organization N. Nonprofit O. Public Housing Agency P. Other (Specify) </div>
--	---

8. Type of Application: <input checked="" type="checkbox"/> New <input type="checkbox"/> Continuation <input type="checkbox"/> Revision If Revision, enter appropriate letter(s) in box(es): <input type="checkbox"/> <input type="checkbox"/> A. Increase Award B. Decrease Award C. Increase Duration D. Decrease Duration Other (specify)	9. Name of Federal Agency U.S. Department of Housing and Urban Development
--	--

10. Catalog of Federal Domestic Assistance Number (xx-yyy) Title: <div style="display: inline-block; border: 1px solid black; padding: 2px 10px;">14</div> <div style="display: inline-block; border: 1px solid black; padding: 2px 10px;">230</div> HOME Investment Partnerships Program	11. Descriptive Title of Applicant's Project Year 10 HOME Program
--	---

12. Areas Affected by Project (cities, counties, States, etc.) District of Columbia (District-wide)		13. Proposed Project Start Date (mm/dd/yyyy): 10/01/2002 Ending Date (mm/dd/yyyy): 09/30/2003	
14. Congressional Districts of a. Applicant: District of Columbia b. Project: District of Columbia			

15. Estimated Funding <div style="background-color: #cccccc; height: 150px; display: flex; align-items: center; justify-content: center; font-size: 24px; font-weight: bold;"> Complete form HUD-424-M, Funding Matrix </div>	16. Is Application Subject to Review by State Executive Order 12372 Process? a. Yes This pre-application/application was made available to the State Executive Order 12372 Process for review on: Date (mm/dd/yyyy) 07/08/2002 b. No <input type="checkbox"/> Program is not covered by E.O. 12372 or <input type="checkbox"/> Program has not been selected by State for review.
---	--

17. Is the Applicant Delinquent on Any Federal Debt? <input type="checkbox"/> Yes If "Yes," attach an explanation <input checked="" type="checkbox"/> No		
---	--	--

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5. Applicant Information Legal Name District of Columbia Address (give city, county, State, and zip code) 801 North Capitol Street, N F Washington, DC 20002		Organizational Unit Department of Housing and Community Development Name and telephone number of the person to be contacted on matters involving this application (give area code) Paul Cohn (202) 442-7233	
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--	---

8. Type of Application: <input checked="" type="checkbox"/> New <input type="checkbox"/> Continuation <input type="checkbox"/> Revision If Revision, enter appropriate letter(s) in box(es): <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> A. Increase Award B. Decrease Award C. Increase Duration D. Decrease Duration Other (specify)	A. State B. County C. Municipal D. Township E. Interstate F. Inter-municipal G. Special District H. Independent School Dist. I. State Controlled Institution of Higher Learning J. Private University K. Indian Tribe L. Individual M. Profit Organization N. Nonprofit O. Public Housing Agency P. Other (Specify)
--	--

9. Name of Federal Agency U.S. Department of Housing and Urban Development	10. Catalog of Federal Domestic Assistance Number (xx-yyy) <div style="display: flex; justify-content: space-between; align-items: center;"> <div style="border: 1px solid black; padding: 2px 10px;">14</div> <div style="border: 1px solid black; padding: 2px 10px;">231</div> </div> Title: Emergency Shelter Grant
--	---

11. Descriptive Title of Applicant's Project Emergency Shelter Grant program	12. Areas Affected by Project (cities, counties, States, etc.) District of Columbia (District-wide)
--	---

13. Proposed Project Start Date (mm/dd/yyyy) 10/01/2002 Ending Date (mm/dd/yyyy) 09/30/2003	14. Congressional Districts of a. Applicant District of Columbia	b. Project District of Columbia
--	--	---

15. Estimated Funding <div style="background-color: #cccccc; padding: 20px; text-align: center;"> <p>Complete form HUD-424-M, Funding Matrix</p> </div>	16. Is Application Subject to Review by State Executive Order 12372 Process? a. Yes This pre-application/application was made available to the State Executive Order 12372 Process for review on: <div style="margin-left: 40px;"> Date (mm/dd/yyyy) 07/08/2002 </div> b. No <input type="checkbox"/> Program is not covered by E.O. 12372 or <input type="checkbox"/> Program has not been selected by State for review.
--	---

17. Is the Applicant Delinquent on Any Federal Debt? <input type="checkbox"/> Yes If "Yes," attach an explanation <input checked="" type="checkbox"/> No	
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d. Signature of Authorized Representative 		e. Date Signed (mm/dd/yyyy) July 8, 2002

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		4. Date Received by Federal Agency (mm/dd/yyyy)	Federal Identifier				
5. Applicant Information <table style="width:100%;"> <tr> <td style="width:50%;"> Legal Name District of Columbia </td> <td style="width:50%;"> Organizational Unit Department of Housing and Community Development </td> </tr> <tr> <td colspan="2"> Address (give city, county, State, and zip code) 801 North Capitol Street, N.E. Washington, DC 20002 </td> </tr> </table>				Legal Name District of Columbia	Organizational Unit Department of Housing and Community Development	Address (give city, county, State, and zip code) 801 North Capitol Street, N.E. Washington, DC 20002	
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10. Catalog of Federal Domestic Assistance Number (xx-yyy) Title: <div style="border: 1px solid black; padding: 2px;">14</div> — <div style="border: 1px solid black; padding: 2px;">241</div> Housing for Persons with AIDS (HOPWA) program		11. Descriptive Title of Applicant's Project Year 10 HOPWA program. The District of Columbia is the grantee for the formula award to the Washington, DC Eligible Metropolitan Statistical Area (EMSA)					
12. Areas Affected by Project (cities, counties, States, etc.) District of Columbia (District-wide). Through subrecipients, various suburban counties of Maryland, Virginia and West Virginia							
13. Proposed Project Start Date (mm/dd/yyyy) Ending Date (mm/dd/yyyy) 10/01/2002 09/30/2003		14. Congressional Districts of a. Applicant District of Columbia, var. counties of MD, VA, WV b. Project District of Columbia, var. counties					
15. Estimated Funding <div style="background-color: #cccccc; padding: 20px; text-align: center;"> Complete form HUD-424-M, Funding Matrix </div>		16. Is Application Subject to Review by State Executive Order 12372 Process? a. Yes This pre-application/application was made available to the State Executive Order 12372 Process for review on: Date (mm/dd/yyyy) 07/08/2002 b. No <input type="checkbox"/> Program is not covered by E.O. 12372 or <input type="checkbox"/> Program has not been selected by State for review.					
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Federal Assistance Funding Matrix

The applicant must provide the funding matrix shown below, listing each program for which Federal funding is being requested, and complete the certifications.

Program*	Applicant Share	Federal Share	State Share	Local	Other	Program Income	Total
Community Development Block Grant (CDBG)	\$0	\$24,334,000	\$0	\$0	\$0	\$8,950,000	\$33,284,080
HOME Investment Partnerships Program (HOME)	\$0	\$7,654,000	\$0	\$0	\$0	\$400,000	\$8,054,000
Housing for Persons with AIDS (HOPWA) program	\$0	\$8,721,000	\$0	\$0	\$0	\$0	\$8,721,000
Emergency Shelter Grant (ESG) program	\$0	\$830,000	\$0	\$0	\$0	\$0	\$830,000
Grand Totals	\$0	\$41,539,000	\$0	\$0	\$0	\$9,350,000	\$50,889,000

* For FHIPs, show both initiative and component

Instructions for the HUD-424-M

Public reporting burden for this collection of information is estimated to average 45 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless that collection displays a valid OMB control number.

This form is to be used by applicants requesting funding from the Department of Housing and Urban Development for application submissions for Federal assistance.

Enter the following information:

Program: The HUD funding program you are applying under.

Applicant Share: Enter the amount of funds or cash equivalent of in-kind contributions you are contributing to your project or program of activities.

Federal Share: Enter the amount of HUD funds you are requesting with your application.

State Share: Enter the amount of funds or cash equivalent of in-kind services the State is contributing to your project or program of activities.

Local Share: Enter the amount of funds or cash equivalent of in-kind services your local government is contributing to your project or program of activities.

Other: Enter the amount of other sources of private, non-profit, or other funds or cash equivalent of in-kind services being contributed to your project or program of activities.

Program Income: Enter the amount of program income you expect to generate and contribute to this program over the life of your award.

Total: Please total all columns and fill in the amounts.